

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

OMB No. 1513-1150

Exempt Organizations
and Other Forms

- Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)
 ► All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form
 ► The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2012 calendar year, or tax year beginning _____, 2012 and ending _____.

B Name of organization

C Name of organization <i>Citizens For Accountable Government</i>	D Employer identification number 20-2952738
Address and suite for P.O. Box numbers to be delivered to the organization <i>%600 Lee May Jr 2143 Oak St Ogden, UT 84401</i>	E Telephone number (435) 622-1742

G Accounting method Cash Accrual Other (specify) ►

I Website: ►

J Tax-exempt status (check all that apply) 501(c)(3) 501(c)(4) 501(c)(6) 501(c)(7) 501(c)(12) 527 X Form 990, 990-EZ or 990-PF

K Check ► if the organization is not a section 501(c)(3) supporting organization or a section 527 organization, and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 1 through 18 to determine gross receipts if gross receipts are \$200,000 or more or if total assets (Part II line 23, column (B)) are \$500,000 or more. File Form 990 instead of Form 990-EZ. ► O**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

1 Contributions, gifts, grants, and similar amounts received	1	O
2 Program service revenue including government fees and contracts	2	
3 Membership dues and assessments	3	
4 Investment income	4	
5a Gross amount from sale of assets other than inventory	5a	
b Loss, cost or other basis and sales expenses	5b	O
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
6 Gaming and fund-raising events		
a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b Gross income from fundraising events (not including \$ O of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c Less direct expenses from gaming and fundraising events	6c	
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
7a Gross sales of inventory less returns and allowances	7a	O
b Less cost of goods sold	7b	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8 Other revenue (describe in Schedule O)	8	O
9 Total revenue. Add lines 1, 2, 3, 4, 6d, 7c, 8, and 18	9	
10 Grants and similar amounts paid (see Schedule O)	10	
11 Benefits paid to or for members 1108	11	
12 Salaries, other compensation, and employee benefits	12	
13 Professional fees and other payments to independent contractors	13	
14 Occupancy, rent, utilities, and maintenance	14	
15 Printing, publications, postage, and shipping	15	
16 Other expenses (describe in Schedule O)	16	O
17 Total expenses. Add lines 10 through 16	17	
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	
20 Other changes in net assets or fund balances (explain in Schedule O)	20	
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	O

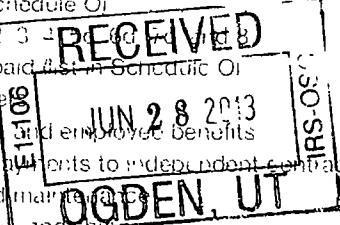
For Paperwork Reduction Act Notice, see the separate instructions

C. (Rev. 10-94)

Form 990-EZ (2012)

0423256148 AUG 06 2013
Net SCANNED AUG 09 2013

54018



123

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part VI. Check if the organization used Schedule O to respond to any question in this Part V.)

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O.	33	1
34	Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions).	34	1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	1
b	If 'Yes' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O.	35b	1
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice reporting and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III.	35c	1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N.	36	1
37a	Enter amount of political expenditures direct or indirect, as described in the instructions ► [37a]	37a	1
b	Did the organization file Form 1120-POL for this year?	37b	1
38a	Did the organization borrow from or make any loans to any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	1
b	If 'Yes,' complete Schedule L, Part II and enter the total amount involved.	38b	1
39	Section 501(c)(7) organizations: Enter	39	1
a	Initiation fees and capital contributions included on line 9	39a	1
b	Gross receipts included on line 9 for public use of club facilities	39b	1
40a	Section 501(c)(3) organizations: Enter amount of tax imposed on the organization during the year under section 4911 ► [4912] ► [495c] ► [495d]	40a	1
b	Section 501(c)(3) and 501(c)(4) organizations: Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.	40b	1
c	Section 501(c)(3) and 501(c)(4) organizations: Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955 and 4958 ► [495c]	40c	1
d	Section 501(c)(3) and 501(c)(4) organizations: Enter amount of tax on line 40c reimbursed by the organization ► [495d]	40d	1
e	All organizations: At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-1.	40e	1
41	List the states with which a copy of this return is filed ►		
42a	The organization's books are in care of ►	Telephone no. ►	
	Located at ►	ZIP + 4 ►	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42b	1
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? If 'Yes,' enter the name of the foreign country ►	42c	1
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► [43]	43	1
44a	Did the organization maintain any donor-advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.	44a	1
b	Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.	44b	1
c	Did the organization receive any payments for indoor tanning services during the year?	44c	1
d	If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.	44d	1
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	1
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions).	45b	1

- 46 Did the organization engage directly or indirectly in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.

46	Yes	No
----	-----	----

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52 and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI.

- 47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.
- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.
- 49a Did the organization make any transfers to an exempt non-charitable related organization?
- b If "Yes," was the related organization a section 527 organization?
- 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of employee and their function	(b) Average hours per week devoted to the organization	(c) Estimated compensation from the organization (Form W-2, Box FISC)	(d) % of benefits contributed to employee (Form W-2, Box 10)	(e) Estimated compensation from the organization (Form W-2, Box 10)

- f Total number of other employees paid over \$100,000 ►

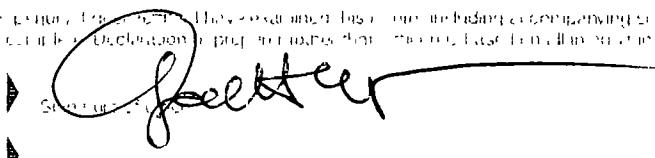
- 51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

- (a) Name and address of each independent contractor paid more than \$100,000 ► (b) Type of service ► (c) Compensation ►

- d Total number of other independent contractors each receiving over \$100,000 ►

- 52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A. ► Yes No

Under penalties of perjury, I declare that the organization has not, including compensating relatives and dependents, claimed the deduction on Schedule A or Schedule C for any amount in excess of the amount shown above, which is greater than any known deduction.

Sign Here				Date
Type of preparer (check one)				Preparer's signature
Paid Preparer Use Only	Proprietorship	LLC	Check Self-employed	PTIN
Firm name ►		Firm EIN ►	Phone no. ►	
May the IRS discuss this return with the preparer shown above? See instructions. ► Yes No				



Department of Treasury
Internal Revenue Service
Ogden UT 84201-0016

Notice CP259H
Tax period December 31, 2011
Notice date June 10, 2013
Employer ID number 20-2952738
Page 3 of 4

INTERNAL REVENUE SERVICE
OGDEN UT 84201-0016

039303



Fold here

Response form

Complete both sides of this form, and send it to us along with your Form 990/990-EZ in the enclosed envelope. Be sure our address shows through the window.

If you are only sending us your completed Response form, you may fax it to us at 1-801-620-3253 (not a toll-free number).

Provide your contact information

If your address has changed, please make the changes below.

CITIZENS FOR ACCOUNTABLE GOVERNMENT

% GALE MOYER

2143 OAK ST

LEBANON PA 17042-5727

a.m.
 p.m.

a.m.
 p.m.

Primary Phone

Best time to call

Secondary Phone

Best time to call

1. Indicate whether any of the following circumstances apply to you

If you already filed a Form 990/990-EZ

500515

I already filed my tax return for December 31, 2011, and I am enclosing a signed and dated copy of the return (or confirmation of electronic filing) as verification.

Name(s) shown on return

Employer Identification number (EIN) listed on the return

Is this EIN different from the one on this notice? Yes No

Form(s) filed

Tax period(s) ending date

Date tax return was filed

If you are filing late

023

JUL 02 2013

RECEIVED ENTITY DEPT

I'm enclosing a signed and dated copy of my December 31, 2011 return (plus any schedules and attachments).

Explain why you are filing late.

I DO NOT HAVE AN EXCUSE
I DO NOT USE THIS
ORGANIZATION AT ALL
BUT WANT TO KEEP IT,
IT GENERATES \$0 IN EXPENSES

Continued on back ..

Notice	CP259H
Tax period	December 31, 2011
Notice date	June 10, 2013
Employer ID number	20-2952738
Page 4 of 4	

Indicate whether any of the following circumstances apply to you - **continued**

If you don't think you have to file Form 990 or 990-EZ for December 31, 2011

Explain why you don't think you are required to file a Form 990 or Form 990-EZ for December 31, 2011.

- My organization's gross receipts are less than \$25,000.
- My organization is a Qualified State or Local Political Organization and its gross receipts are less than \$100,000.
- My organization ceased operations as of: _____, and filed a Final Form 8871 on _____ (date of filing).
- Other reason for not filing (explain below; attach additional sheets if necessary)

I have no gross
A filing

2. Please sign and send this form to us

Under penalties of perjury, to the best of my knowledge, the information in this form is correct and complete.

Signature

Title

Date

Jeffrey P. Powers 6/21/13